Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>8-18-10</u>	Address:	JACKSON ST @ MICHIGAN ST
Case #:	24F31792		PLYMOUTH, 1N 46563
County:	<u>MARSHALL</u>		
Type of Laboratory Scizure (check one) Operational Lab Chemical/Glassware/Equipment (only) Dumpsite (only)		Seizure Location (c ☐ Residence ☐ Outbuilding ☑ Vehicle	theck all that apply) Hotel/Motel Open – No Structure Other:
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply) Lithium/Anumonia Reaction(s):			
Red Phosphorous/Iodine Reaction(s):			
□ Flammable Solvents: <u>VEH</u>			
Water Reactive Metal (Lithium):			
Anhydrous Ammonia: V <u>EH</u>			
☐ Hydrochloric Acid Gas Generator(s);			
Corrosive Acid:			
Corrosive Base:			
Other (item and location): PSEUDOPHEDRINE, VEII			
∏ Yes _ ⊠ No	er age 18 discovered (cheek one) (number present) port to Child Protective Services	Ephedrina	<u>Information</u> Pseudoephedrine Tracking Log rehant Tip <u>H</u>
This report is to be faxed to the following agencies that serve the location:			
Health Depa	ment: PLYMOUTH artment: MARSHALL etion Service:	Fax: 574-93 Fax: 574-93 Fax:	36-9247
For further information regarding this methamphetamine laboratory, contact Investigating Officer: B. <u>WENTWORTII</u> Phone <u>800-552-2959</u>			

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

^{***} This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.